PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE _ DE

Mail Stop ISSUE ___E Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

41577

7590

06/20/2007

WOODARD, EMHARDT, MORIARTY, MCNETT & HENRY LLIB.
111 MONUMENT CIRCLE, SUITE 3700
INDIANAPOLIS, IN 46204-5137

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/943,080 08/30/2001			Carlo Effenhauser		7404-727	7687
TITLE OF INVENTION: SYSTEM FOR WITHDRAWING SMALL AMOUNTS OF BODY FLUID						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE TOTAL FEE(S) DI	JE DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	09/20/2007
EXAMINER		· ART UNIT	CLASS-SUBCLASS			
SZMAL, BR	IAN SCOTT	3736	600-584000	•		
1. Change of corresponde CFR 1.363).	ence address or indicatio	n of "Fee Address" (37	2. For printing on the patent front page, list			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Woodard, Emhardt, Moriarty, McNett & Henry LLP			
			(2) the name of a single firm (having as a member a 111 Monument Circle, Suite 3700			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COU						
Roche Diagnostics Operations, Inc.			Indianapolis, IN			
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
S Issue Fee			A check is enclosed.			
☑ Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any			
5 Chango in Entity Sta	tur (from status indicate	d abases	overpayment, to Depo	sit Account Numbe	er <u>23-3030</u> (enclose	an extra copy of this form).
5. Change in Entity Status (from status indicated above) \[\sum_{a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \] \[\sum_{b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).} \]						
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.						
interest as shown by the records of the United States Patent and Trademark Office.						
Authorized Signature		alij		Date9/	19/2007	
Typed or printed name	Charles P. Schma	al	Registration No. 45,082			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, prepa submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Comme Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Balexandria, Virginia 22313-1450.						
an application. Confiden	tiality is governed by 37 C	U.S.C. 122 and 37 CFR	on is required to obtain or r 1.14. This collection is est	ctain a benefit by the imated to take 12 r	he public which is to file (a	and by the USPTO to process)
this form and/or suggesti	application form to the ons for reducing this bu	COSPTO. Time will vary rden, should be sent to the	depending upon the indivice Chief Information Office	idual case. Any co	mments on the amount of Trademark Office, U.S. D.	time you require to complete
Alexandria, Virginia 223	irginia 22313-1450. DC 13-1450.	NOT SEND FEES OR	COMPLETED FORMS TO	THIS ADDRESS	S. SEND TO: Commission	or for Patents, P.O. Box 1450,

PTOL-85 (Rev. 07/06) Approved for use through 06/30/2007.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.